U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 6/55	2. Fiscal Year Covered From:
	1 / 1 / 04 Through: $12 / 31 / 04$
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Bernie Hostein	Name United Steelworkers of America, AFL-CIO
	Labor Organization File Number 000-094
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street Five Gateway Center	Street Five Gateway Center
City Pittsburgh	City Pittsburgh
State Pennsylvania ZIP Code + 4 15222-1214	State Pennsylvania ZIP Code + 4 15222-1214
5. Position in labor organization. Assistant to the Preside	nt
Enter appropriate data below If, during the past fiscal year, you or your spo	
	ise or minor chird directly or indirectly had any or the following interests sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any).	
6. Name and address of Employer (including trade name, if any).  Name	7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:	
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4  Sign  15. Signature and verification. The undersigned declares, under penalty of	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.  ature  Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4  Sign  15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.  ature  Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Bernie Hostein	File	e Number <b>U-</b>
B. Held an interest in or derived income or economic benefit with monetary values ubstantial part of which consists of buying from, selling or leasing to, or otherwof an employer whose employees your labor organization represents or is active. (2) any part of which consists of buying from or selling or leasing directly or ind dealing with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise	
8. Name and address of Business (including trade name, if any).  Name Union Privilege  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 300  Street 1125 15th Street, N.W.  City Washington  State D.C. ZIP Code +4 20005	9. Business deals with:  X a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  ZIP Code + 4	11.a. Nature of such dealing.  Provider of consumunion members.  11.b. Approximate dollar value of 12.a. Nature of interest held or i See attached.	NORTH CONTROL OF THE
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	Galdenin an arrowing the retained with an address on an infection according to

UNION PRIVILEGE	EGE								
SUMMARY OF	LM30 INFORMATION - Rep	SUMMARY OF LM30 INFORMATION - Report of income or other benefits with monetary value	ry value						
2004									
Comments:									
If no notative	on in the title area we do not	If no notation in the title area we do not have readily available for 2004						AMOUNT	
								10	
NOIND	UNION OFFICIAL	TITLE	ADDRESS	CITY	STATE	ZIP	DATE	REPORT DESCRIPTION	UP SEF
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	۲ ×	10001-6708	10/13/2004	85.92 Dinner mtg - Univ	DP10/13ER
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	N≺	10001-6708	3/17/2004	62.67 Dinner mtg - Union Privilege programs	DP3/17ER
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	γ	10001-6708	4/24/2004	54.50 Dinner mtg - Union Privilege programs	DP30159
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	Σ×	10001-6708	4/13/2004	70.51 Dinner mtg - Union Privilege programs	DP4/13ER
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	_ Y	10001-6708	7/8/2004	76.67 Dinner mtg - Union Privilege programs	DP7/8ER
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	NY 1	10001-6708	3/6/2004	70.27 Dinner mtg - Union Privilege programs	LT29881
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	NY	10001-6708 04/23-04/27/04	4/23-04/27/04	510.72 Hotel accommodations Liaison Conference	Hvatt30250
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	ΝΥ	10001-6708	4/13/2004	100.00 Liaison Award	BH30019
USWA	Hostein, Bernie	Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	N 1	10001-6708	8/23/2004	56.94 Union made pair of jeans/bolo shirt	KFrvinFR

4/088-20

Name of Person Filing Bernie Hostein	File Number <b>U-</b>
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business ely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Chase c/o Union Privilege	
Trade Name, if any:	X a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any Suite 300	c. Employer
Street 1125 15th Street, N.W.	Constituted and the second and the s
City Washington	
State D.C. ZIP Code + 4 20005	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Provider of mortgage product through Union Privilege, a provider of consumer
Trade Name, if any:	benefits to union members
P.O. Box, Bldg., Room No., if any	
Street	
City	Approximate dollar value of such dealing.      Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.
State ZIP Code + 4	See attached.
	12.b. Amount. \$169.58
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street Annual Control of the Control	
City International Control Con	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

CHASE					
SUMMARY OF	SUMMARY OF LM10/30 INFORMATION				
2004					
Comments:					
If no notat	If no notation in the title area we do not have readily available for 2004	vailable for 2004			
			AGREEMENT AMOUNT TO	AMOUNT TO	
NOINN	UNION OFFICIAL	TITLE	DATE	REPORT	DESCRIPTION
USWA	Hostein, Bernie	Assistant to the President	3/9/2004	\$60.25	\$60.25 Dinner Meeting - Union Plus Mortgage Program
USWA	Hostein, Bernie	Assistant to the President	11/26/2004	\$39.32	\$39.32 Dinner Meeting - Union Plus Mortgage Program
					Dinner Meeting Liaison Conference - Union Plus
USWA	Hostein, Bernie	Assistant to the President	4/25/2004	\$70.01	\$70.01 Mortgage Program

25.6913

Name of Person Filing Bernie Hostein	File Number <b>U</b> -
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or otherwof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization	vise dealing with the business rely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Household (HCS) c/o Union Privilege	v.
Trade Name, if any:	X a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any Suite 300	c. Employer
Street 1125 15th Street, N.W.	Control of an in the original and the control of th
City Washington	
State D.C. ZIP Code + 4 20005	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Provider of credit card program through Union Privilege, a provider of consumer
Trade Name, if any:	benefits to union members.
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	See attached.
	12.b. Amount. \$80.32
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
State ZIP Code + 4	
Emergence of the control of the cont	14 h Amount of payment
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.

HOUSEHOLD (HCS)							-
RY OF LM30 INFORMAT	SUMMARY OF LM30 INFORMATION - Report of income or other benefits with monetary value	with monetary value					
Comments:							
o notation in the title area	If no notation in the title area we do not have readily available for 2004						
						AMOUNT	
						10	
UNION UNION OFFICIAL	L TITLE	ADDRESS	CITY	STATE ZIP	DATE	STATE ZIP DATE REPORT DESCRIPTION	UP REF
JSWA Hostein, Bernie	Hostein, Bernie   Assistant to the President	c/o USWA, 275 Seventh Avenue	New York	NY 10001-6	4/12/2004	80.32 Dinner Union Plus Card Programs	HOGGEOGH